

LAW OFFICE OF
DAVID G. POSZ
2000 L STREET, N.W., SUITE 200
WASHINGTON, D.C. 20036

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

DAVID G. POSZ
KERRY S. CULPEPPER*

(202) 416-1638
FAX (202) 416-1639
POSZLAW.COM

* ADMITTED IN VA ONLY

April 4, 2001

Hon. Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

OIPE HAND DELIVERY FILING CERTIFICATE

Applicant: HATTORI et al.

For: LOAD DRIVE APPARATUS

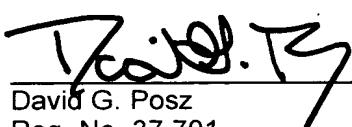
Docket: 1-127

Attorney: David G. Posz

Date of Deposit: April 4, 2001

I hereby certify that this certificate and the following documents are being hand delivered to, and deposited with, the USPTO at the Customer Service Window, Office of Initial Patent Examination, Crystal Plaza Building 2, Room 1B03, 2011 South Clark Place, Arlington, VA 22202 on the above-indicated date, and are addressed to the Commissioner of Patents and Trademarks/Assistant Commissioner for Patents, Washington, D.C., 20231:

- return receipt postcard;
- transmittal form (2 copies);
- fee calculation form (2 copies);
- 37 page specification including 16 numbered claims;
- 13 sheets of formal drawings;
- executed declaration/power of attorney;
- executed assignment with recordation cover sheet (3 pages total);
- check for \$750; and
- 1 certified copy of a priority document (JP 2000-130806).


David G. Posz
Reg. No. 37,701

Attorney for Applicant

JC903 U.S. PTO
09/824763
04/04/01



JC772 U.S. PTO
04/04/01

Please type a plus sign (+) inside this box.

+

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 1-127

First Inventor or Application Identifier

HATTORI et al.

Title LOAD DRIVE APPARATUS

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Specification [Total Pages 37]
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Background of the Invention
 - Summary of the Invention
 - Brief Description of the Drawings
 - Detailed Description of the Preferred Embodiment
 - Claims
 - Abstract of the Disclosure
3. Drawing(s) (35 U.S.C. 113) [Total Sheets 13]
4. Oath or Declaration [Total Sheets 3]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63 (d))
(for continuation/divisional with Box 16 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

***NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)**

TO
Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

ADDRESS TO:

5. Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Copy
 - b. Paper Copy (identical to computer copy)
 - c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. 37 C.F.R. § 3.73(b)
Statement (when there is an assignee) Power of Attorney
9. English Translation Document (if applicable)
10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
11. Preliminary Amendment
12. Return Receipt Postcard (MPEP 503)
(should be specifically itemized)
*Small Entity Statement(s) Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired
13. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
14. Other:
15. Other:

16. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____

Group/Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		or <input type="checkbox"/> Correspondence address below (Insert Customer No. or attach bar code label here)
---	--	---

Name	23400		
	PATENT TRADEMARK OFFICE		
Address			
City	State	Zip Code	
Country	Telephone	(202) 416-1638	Fax (202) 416-1639

Name (Print/type)	DAVID G. POSZ	Registration No. (Attorney/Agent)
Signature		
	Date 4.4.01	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.

FEE TRANSMITTAL for FY 2000		<i>Complete if Known</i>
<i>Patent fees are subject to annual revision.</i>		
TOTAL AMOUNT OF PAYMENT	(\$) 750	Application Number Filing Date First Named Inventor Examiner Name Group/Art Unit Attorney Docket No. 1-127
10903 U.S. PAT. & T. OFFICE 109/824763		

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701	Telephone (202) 416-1638
Signature			Date	4-4-01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant commissioner for Patents, Washington, DC 20231.